

Patient Satisfaction Survey

To help us improve the care we provide to patients and families, please answer the following questions about Dr. Peacock. See Dr. Peacock's picture to refresh your memory.

Insert photo here

1. How much do you agree or disagree with the following statements?

<i>Dr. Peacock:</i>	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>In the middle</i>	<i>Agree</i>	<i>Strongly Agree</i>
...respected and cared about me.	1	2	3	4	5
...listened to me.	1	2	3	4	5
...answered my questions in a way I could understand.	1	2	3	4	5
...knew what he/she was doing.	1	2	3	4	5

2. Overall, how satisfied or dissatisfied are you with the care you received from this doctor?

<i>Very Dissatisfied</i>	<i>Dissatisfied</i>	<i>In the middle</i>	<i>Satisfied</i>	<i>Very Satisfied</i>
1	2	3	4	5

3. Additional comments or suggestions for improvement.

4. The ratings above are the opinions of: (*check one*)

- the patient
 a family member or friend of the patient
 both the patient and a family member/friend

5. How long has this doctor provided care for you? (*check one*)

- 1-3 days
 4-7 days
 More than 7 days

6. Today's date _____

Thank you!

Your anonymous answers will be combined with the answers from other patients and families. Periodically, the feedback is provided to the doctor as part of physician training and education at UCLA.